



RIDE ALONG PROGRAM – LETTER OF INSTRUCTION

The Ride-Along Program is being offered to you by the Frederick Police Department. As a participant in the program, you are expected to adhere to the following instructions.

1. You must sign a release form. The release must be signed and submitted in person with a current identification. If you are under age eighteen then you must have a parent or legal guardian sign the release form. Please provide a telephone number for the parent or legal guardian.
2. Please arrive at the Police Department 15 minutes before the ride is scheduled to begin to sign the necessary forms. If you will not be able to make your scheduled time, please call before the start of the shift.
3. You will be returned to the station at the end of the ride along. In the event that the ride is terminated or you do not wish to complete the ride, you may be returned to the Police Department earlier than scheduled.
4. You are asked to wear conservative clothing suitable for being in contact with the public and the weather conditions.
5. Tape recorders and cameras will not be allowed.
6. It is very important that you do not interfere in the Officer's activities. Please ask any questions you may have at a time that will not interfere with the Officer's duties.
7. You are prohibited from engaging in any police activity. You may not leave the police vehicle or talk with prisoners, suspects, witnesses or other parties contacted on police business.
8. You may ride only once every three months.
9. You are riding in the capacity of an observer only. The Officer is in complete control at all times. You must obey all instructions of the Officer.
10. You must be 16 years of age or older to participate in the Ride Along Program.
11. In the course of your participation you may see or hear confidential information. You are not to disclose any such confidential information, pursuant to applicable statutes of the State of Colorado, and all applicable policies of the Police Department.
12. Your failure to comply with these instructions and the ride-along policy of the Frederick Police Department as set forth in the Policy and Procedure Manual will result in immediate termination from the program, and disqualify you from future participation in the program.

Signature

Date



**RELEASE OF TOWN OF FREDERICK AND FREDERICK
POLICE DEPARTMENT FROM LIABILITY;
REQUEST TO PARTICIPATE IN RIDE-ALONG PROGRAM**

I, _____ of _____
(Print Name) (Street Address, City, State, and Zip Code),

Do willingly participate in the Frederick Police Department's Ride-Along Program, in that I will be riding with Town of Frederick Police Officers, in Town of Frederick police vehicles while on routine patrol.

I hereby waive any and all rights, claims, or causes of action, which may arise against the Town of Frederick, its liability carrier and any or all employees of said Town due to my participation in the Ride-Along Program.

I hereby acknowledge that I assume responsibility for any accident or injury which may befall me while so engaged, and forever release the Town, its Police Department, its liability insurer and all employees of the Town from any claim, whether it be based upon negligence, inadvertent or unforeseen incidents. I further represent that I understand all risks involved and agree that this waiver and release shall be binding upon my heirs, executors, administrators and assigns.

Dated at the Town of Frederick, Colorado _____ / _____ / _____
Month Day Year

Applicant's Signature

Signature of Parent or Guardian
(If applicant is under 18 years of age)

Executed in presence of:

Witness/Title

Date: _____



**APPLICATION FOR PARTICIPATION IN FREDERICK
POLICE DEPARTMENT RIDE-ALONG PROGRAM**

Name: _____

Address: _____

Telephone (Home/Cell): _____

Telephone (Work): _____

Email Address: _____

Date of Birth: _____

Social Security Number: _____

Occupation: _____

Reason for wanting to participate in ride –along program: _____

Date Ride-Along requested: _____

Tentative hours requested: from: _____ to: _____

Submitted this _____ day of _____, 20 _____

Signature: _____

Date: _____

For completion by Frederick Police Department

Application received: _____

Background check completed _____ CCIC _____ NCIC _____ Local _____

Remarks: _____

Ride-along application: _____ approved _____ declined

Signature: _____

Date: _____